

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE WASHINGTON, DC 20224

July 2, 2012

Mud Rock News Dept. MR 1224 PO Box 55819 Boston, MA 02205-5819

Dear Rich Jones:

I am responding to your Freedom of Information Act (FOIA) request dated June 5, 2012 that we received on June 11, 2012.

You asked for all documents mentioning the publicly traded corporation Electronic Arts, Inc., EA Games, EA Mobile, EA Sports, EA Maxis, EA Bioware, EA China, PopCap Games, EA Russia, EA Los Angeles, EA India, and/or EA Korea for the years 1996 – 2012. In addition, I request all documents mentioning Lawrence F. Larry Probst III and John Riccitiello for 2011.

Tax records are confidential and may not be disclosed unless specifically authorized by law. You must provide the written consent of an individual authorized to act on behalf of the corporations named above before we can consider releasing the records you requested. And we must receive the above mentioned taxpayers written consent before we can consider releasing the information you requested.

The consents must be a separate written document pertaining solely to the authorized disclosure. It must include the following:

- Name, address and employer identification number of the corporations and the name, address, and social security number of the taxpayers.
- The type of return or return information to be disclosed
- · The taxable period or year covered
- · The identity of the person to whom the disclosure is to be made
- Signature of the authorized individual and date signed. You must ensure
 the individual has the legal authority to sign the authorization for the
 corporation, and signature of the taxpayer and date signed.

For your convenience, I have enclosed Forms 8821, Tax Information Authorization. When properly completed, this form satisfies all requirements for a valid consent. The IRS must receive the consent within 120 days of the signature date.

If you have any questions please call Disclosure Specialist Kathleen M Kniskern ID # 1000243794, at (312) 292-3534 or write to: Internal Revenue Service, Disclosure Scanning Operation – Stop 93A, PO Box 621506, Atlanta, GA 30362. Please refer to case number F12164-0119.

Sincerely,

Lynda J Dyer

Disclosure Manager Disclosure Office 4

Londa J. Dyer

Enclosure Forms 8821

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

What's New

- Each individual and/or entity must now file and sign a separate Form 8821.
- Appointees will no longer receive inserts, such as forms, publications, and other related materials, with notices.
- The IRS has created a page on IRS.gov for information about Form 8821 and its instructions at www.irs.gov/form8821. Information about any future developments affecting Form 8821 (such as legislation enacted after we release it) will be posted on this page.

Purpose of Form

Form 8821 authorizes any individual, corporation, firm, organization, or partnership you designate to inspect and/or receive your confidential information in any office of the IRS for the type of tax and the years or periods you list on Form 8821. You may file your own tax information authorization without using Form 8821, but it must include all the information that is requested on Form 8821.

Form 8821 does not authorize your appointee to advocate your position with respect to the federal tax laws; to execute waivers, consents, or closing agreements; or to otherwise represent you before the IRS. If you want to authorize an individual to represent you, use Form 2848, Power of Attorney and Declaration of Representative.

Use Form 4506, Request for Copy of Tax Return, to get a copy of your tax return.

Use Form 4506-T, Request for Transcript of Tax Return, to order: (a) transcript of tax account information and (b) Form W-2 and Form 1099 series information.

Use Form 56, Notice Concerning Fiduciary Relationship, to notify the IRS of the existence of a fiduciary relationship. A fiduciary (trustee, executor, administrator, receiver, or guardian) stands in the position of a taxpayer and acts as the taxpayer. Therefore, a fiduciary does not act as an appointee and should not file Form 8821. If a fiduciary wishes to authorize an appointee to inspect and/or receive confidential tax information on behalf of the fiduciary, Form 8821 must be filed and signed by the fiduciary acting in the position of the taxpayer.

When To File

Form 8821 must be received by the IRS within 120 days of the date it was signed and dated by the taxpayer.

Where To File Chart

IF you live in	THEN use this address	Fax Number*
Alabama, Arkansas, Connecticut, Delaware, District of Columbia, Florida, Georgia, Illinois, Indiana, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Mississippi, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, or West Virginia	Internal Revenue Service Memphis Accounts Management Center PO Box 268, Stop 8423 Memphis, TN 38101-0268	901-546-4115
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Iowa, Kansas, Minnesota, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wisconsin, or Wyoming	Internal Revenue Service 1973 N. Rulon White Blvd. MS 6737 Ogden, UT 84404	801-620-4249
All APO and FPO addresses, American Samoa, nonpermanent residents of Guam or the Virgin Islands**, Puerto Rico (or if excluding income under section 933), a foreign country, U.S. citizens and those filing Form 2555, 2555-EZ, or 4563.	Internal Revenue Service International CAF 2970 Market St. MS 3-E08.123 Philadelphia, PA 19104	267-941-1017

^{*}These numbers may change without notice.

^{**}Permanent residents of Guam should use Department of Taxation, Government of Guam, P.O. Box 23607, GMF, GU 96921; permanent residents of the Virgin Islands should use: V.I. Bureau of Internal Revenue, 9601 Estate Thomas Charlotte Amalie, St. Thomas, V.I. 00802.

Form 8821 (Rev. 10-2011) Page **3**

Where To File

Generally, mail or fax Form 8821 directly to the IRS. See the Where To File Chart, above. Exceptions are listed below.

If Form 8821 is for a specific tax matter, mail or fax it to the office handling that matter. For more information, see the instructions for line 4.

Your appointee may be able to file Form 8821 electronically with the IRS from the IRS website. For more information, go to www.irs.gov. Under the Tax Professionals tab, click on e-services—Online Tools for Tax Professionals. If you complete Form 8821 for electronic signature authorization, do not file a Form 8821 with the IRS. Instead, give it to your appointee, who will retain the document.

Revocation of an Existing Tax Information Authorization

If you want to revoke an existing tax information authorization and do not want to name a new appointee, send a copy of the previously executed tax information authorization to the IRS, using the *Where To File Chart*, above. The copy of the tax information authorization must have a current signature and date of the taxpayer under the original signature on line 7. Write "REVOKE" across the top of Form 8821.

If you do not have a copy of the tax information authorization you want to revoke, send a statement to the IRS. In the statement, indicate that the authority of the appointee is revoked, list the name and address of each recognized appointee whose authority is revoked, list the tax matters and periods, and sign and date the statement. If you are completely revoking the authority of the appointee, state "remove all years/periods" instead of listing the specific tax matters, years, or periods on the form.

To revoke a specific use tax information authorization, send the tax information authorization or statement of revocation to the IRS office handling your case, using the above instructions.

Taxpayer Identification Numbers (TINs)

TINs are used to identify taxpayer information with corresponding tax returns. It is important that you furnish correct names, social security numbers (SSNs), individual taxpayer identification numbers (ITINs), or employer identification numbers (EINs) so that the IRS can respond to your request.

Partnership Items

Sections 6221-6234 authorize a Tax Matters Partner to perform certain acts on behalf of an affected partnership. Rules governing the use of Form 8821 do not replace any provisions of these sections.

Appointee Address Change

If the appointee's address has changed, a new Form 8821 is not required. The appointee can send a written notification that includes the new information and their signature to the location where the Form 8821 was filed.

Specific Instructions

Line 1. Taxpayer Information

Individuals. Enter your name, TIN, and your street address in the space provided. Do not enter your

appointee's address or post office box. If a return is a joint return, the appointee(s) identified will only be authorized for you. Your spouse or former spouse must submit a separate Form 8821 to designate an appointee.

Corporations, partnerships, or associations. Enter the name, EIN, and business address.

Employee plan or exempt organization. Enter the name, address, and EIN or SSN of the plan sponsor or exempt organization, and the plan name and three-digit plan number. If the plan's trust is under examination then see the instructions relating to trust.

Trust. Enter the name, title, and address of the trustee, and the name and EIN of the trust.

Estate. Enter the name and address of the estate. If the estate does not have an identification number, enter the decedent's SSN or ITIN.

Line 2. Appointee

Enter your appointee's full name. Use the identical full name on all submissions and correspondence. Enter the nine-digit CAF number for each appointee. If an appointee has a CAF number for any previously filed Form 8821 or power of attorney (Form 2848), use that number. If a CAF number has not been assigned, enter "NONE," and the IRS will issue one directly to your appointee. The IRS does not assign CAF numbers to requests for employee plans and exempt organizations.

If you want to name more than one appointee, indicate so on this line and attach a list of appointees to Form 8821. If more than one appointee is listed, notices and correspondence will only be sent to the first two appointees.

Check the appropriate box to indicate if either the address, telephone number, or fax number is new since a CAF number was assigned.

Line 3. Matters

Enter the type of tax, the tax form number, the years or periods, and the specific matter. Enter "Not applicable," in any of the columns that do not apply.

For example, you may list "Income, 1040" for calendar year "2006" and "Excise, 720" for "2006" (this covers all quarters in 2006). For multiple years or a series of inclusive periods, including quarterly periods, you may list 2004 through (thru or a hyphen) 2006. For example, "2004 thru 2006" or "2nd 2005-3rd 2006." For fiscal years, enter the ending year and month, using the YYYYMM format. Do not use a general reference such as "All years," "All periods," or "All taxes." Any tax information authorization with a general reference will be returned.

You may list the current year or period and any tax years or periods that have already ended as of the date you sign the tax information authorization. However, you may include on a tax information authorization only future tax periods that end no later than 3 years after the date the tax information authorization is received by the IRS. The 3 future periods are determined starting after December 31 of the year the tax information authorization is received by the IRS. You must enter the type of tax, the tax form number, and the future year(s) or period(s). Only tax forms directly related to the taxpayer may be listed on Line 3. If the matter relates to estate tax, enter the date of the decedent's death instead of the year or period.

Form 8821 (Rev. 10-2011)

In **column (d)**, enter any specific information you want the IRS to provide. Examples of column (d) information are: lien information, a balance due amount, a specific tax schedule, or a tax liability.

For requests regarding Form 8802, Application for United States Residency Certification, enter "Form 8802" in column (d) and check the specific use box on line 4. Also, enter the appointee's information as instructed on Form 8802.

Note. If the taxpayer is subject to penalties related to an individual retirement account (IRA) (for example, a penalty for excess contributions) enter, "IRA civil penalty" on line 3, column a.

Line 4. Specific Use Not Recorded on CAF

Generally, the IRS records all tax information authorizations on the CAF system. However, authorizations relating to a specific issue are not recorded.

Check the box on line 4 if Form 8821 is filed for any of the following reasons: (a) requests to disclose information to loan companies or educational institutions, (b) requests to disclose information to federal or state agency investigators for background checks, (c) application for EIN, or (d) claims filed on Form 843, Claim for Refund and Request for Abatement. If you check the box on line 4, your appointee should mail or fax Form 8821 to the IRS office handling the matter. Otherwise, your appointee should bring a copy of Form 8821 to each appointment to inspect or receive information. A specific-use tax information authorization will not revoke any prior tax information authorizations.

Line 6. Retention/Revocation of Tax Information Authorizations

Check the box on this line and attach a copy of the tax information authorization you do not want to revoke. The filing of Form 8821 will not revoke any Form 2848 that is in effect.

Line 7. Signature of Taxpayer(s)

Individuals. You must sign and date the authorization. If a joint return has been filed, your spouse must execute his or her own authorization on a separate Form 8821 to designate an appointee.

Corporations. Generally, Form 8821 can be signed by: (a) an officer having legal authority to bind the corporation, (b) any person designated by the board of directors or other governing body, (c) any officer or employee on written request by any principal officer and attested to by the secretary or other officer, and (d) any other person authorized to access information under section 6103(e).

Partnerships. Generally, Form 8821 can be signed by any person who was a member of the partnership during any part of the tax period covered by Form 8821. See *Partnership Items*, above.

Employee Plan. If the plan is listed as the taxpayer on Line 1, a duly authorized individual having authority to bind the taxpayer must sign and that individual's exact title must be entered.

If the trust is the taxpayer, listed on Line 1, a trustee having the authority to bind the trust must sign with the title of trustee entered. A Form 56 (Notice Concerning Fiduciary Relationship) must also be completed to identify the current trustee.

Estate. If there is more than one executor, only one co-executor having the authority to bind the estate is required to sign. See Regulations section 601.503(d).

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Privacy Act and Paperwork Reduction Act Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. Form 8821 authorizes the IRS to disclose your confidential tax information to the person you appoint. This form is provided for your convenience and its use is voluntary. The information is used by the IRS to determine what confidential tax information your appointee can inspect and/or receive. Section 6103(c) and its regulations require you to provide this information if you want to designate an appointee to inspect and/or receive your confidential tax information. Under section 6109, you must disclose your identification number. If you do not provide all the information requested on this form, we may not be able to honor the authorization. Providing false or fraudulent information may subject you to penalties.

We may disclose this information to the Department of Justice for civil or criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is: **Recordkeeping**, 6 min.; **Learning about the law or the form**, 12 min.; **Preparing the form**, 24 min.; **Copying and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 8821 simpler, we would be happy to hear from you. You can write to Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:M:S, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. **Do not** send Form 8821 to this address. Instead, see the *Where To File Chart*, earlier.

Department of the Treasury Internal Revenue Service

Tax Information Authorization

 ▶ Do not sign this form unless all applicable lines have been completed.
 ▶ Do not use this form to request a copy or transcript of your tax return. Instead, use Form 4506 or Form 4506-T.

	OMB No. 1545-1165
	For IRS Use Only
Rece	ived by:
Name	•
Telep	hone
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1 Taxpayer information. Taxpaye	er(s) must sign and date this form	on line	e 7.	
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2 Appointee. If you wish to name	more than one appointee, attacl	n a list t	o this form.	
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To revoke this tax information au	ithorization, see the instructions	on pag	e 4.	
7 Signature of taxpayer(s). If a ta corporate officer, partner, guardi that I have the authority to execu	an, executor, receiver, administr	rator, tru	ustee, or party other than	the taxpayer, I certify
► IF NOT SIGNED AND DATED	, THIS TAX INFORMATION AU	THORI	ZATION WILL BE RETUR	RNED.
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Print Name	Title (if applicable)	Pri	int Name	Title (if applicable)
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(Rev. October 2011)

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Instead, use Form 4506 or Form 4506-T.	Function
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(Rev. October 2011)

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OMB No. 1545-1165

For IRS Use Only
Received by:
Name
Telephone
Function

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 Taxpayer information. Taxpayer 	er(s) must sign and date this for	m on line	7.		
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1 Taxpayer information. Taxpaye	r(s) must sign and date this form	n on line	e 7.		
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7 Signature of taxpayer(s). If a ta corporate officer, partner, guard that I have the authority to execute	ian, executor, receiver, administ	trator, tr	ustee, or party other than	the taxpayer, I certify	
► IF NOT SIGNED AND DATED), THIS TAX INFORMATION AL	UTHOR	IZATION WILL BE RETU	RNED.	
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For IRS Use Only
Received by:
Name
Telephone
Function

OMB No. 1545-1165

1 Taxpayer information. Taxpaye	er(s) must sign and date this form	n on line	7.	
Taxpayer name(s) and address (type or print)		Taxpayer identification number		
			Daytime telephone number	Plan number (if applicable)
2 Appointee. If you wish to name	more than one appointee, attacl	h a list t	o this form.	
Name and address		CAF N	1_	
		PTIN		
		Telepl	none No.	
		I ax IV	·	elephone No.
3 Tax matters. The appointee is a tax matters listed on this line. Do	authorized to inspect and/or rece	eive con	fidential tax information in	
(a)	(b)	<u> </u>	(c)	(d)
Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty	Type of Tax Tax Form Number Year(s) or Period(s) Specific Tax Matt		Specific Tax Matters (see instr.)	
4 Specific use not recorded on use not recorded on CAF, check	Centralized Authorization File this box. See the instructions of	(CAF). on page	If the tax information aut 4. If you check this box, s	thorization is for a specific skip lines 5 and 6 ▶ □
5 Disclosure of tax information (a If you want copies of tax information) basis, check this box Note. Appointees will no longer b If you do not want any copies of	mation, notices, and other writt	ten com other re	nmunications sent to the	appointee on an ongoing ▶ □ otices.
6 Retention/revocation of tax in authorizations for the same tax to revoke a prior tax information and check this box To revoke this tax information at	matters you listed on line 3 aboven authorization, you must attach	ve unles	ss you checked the box or y of any authorizations yo 	n line 4. If you do not want
7 Signature of taxpayer(s). If a ta corporate officer, partner, guard that I have the authority to execu	ian, executor, receiver, administ	rator, tr	ustee, or party other than	the taxpayer, I certify
▶ IF NOT SIGNED AND DATED), THIS TAX INFORMATION AU	JTHORI	ZATION WILL BE RETUR	RNED.
▶ DO NOT SIGN THIS FORM II	FIT IS BLANK OR INCOMPLET	ΓE.		
Signature	Date	Si	gnature	Date
Print Name	Title (if applicable)	Pr	int Name	Title (if applicable)
PIN nu	mber for electronic signature			PIN number for electronic signature

(Rev. October 2011)

Department of the Treasury Internal Revenue Service

Tax Information Authorization

▶ Do not sign this form unless all applicable lines have been completed.

▶ Do not use this form to request a copy or transcript of your tax return.
Instead, use Form 4506 or Form 4506-T.

OMB No. 1545-1165
For IRS Use Only
Received by:
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Function
Date

	ayer name(s) and address (type or print)	er information. Taxpayer(s) must sign and date this form on line 7.) and address (type or print) Taxpayer identification number				
					DI	-1-1-1
				Daytime telephone number	Plan number (if applic	cable)
2	Appointee. If you wish to name	more than one appointee, attac	ch a list	to this form.		
	e and address		CAF I			
			PTIN			
			Telep	hone No.		
			rax iv	0.		
				cif new: Address Te		
3	Tax matters. The appointee is a tax matters listed on this line. Do	not use Form 8821 to request	eive cor copies	of tax returns.		for the
	(a) Type of Tax	(b)		(c) Year(s) or Period(s)	(d) Specific Tax Matters	(eaa inetr)
(1	ncome, Employment, Excise, etc.)	Tax Form Number (1040, 941, 720, etc.)	(see	the instructions for line 3)	Specific rax Matters	(See msu.)
	or Civil Penalty		<u> </u>			
4	Specific use not recorded on	Centralized Authorization File	e (CAF)	If the tax information au	thorization is for a sp	pecific
	use not recorded on CAF, check	this box. See the instructions	on page	4. If you check this box, s	skip lines 5 and 6 .	. ▶ □
	Disclosure of tax information (you must check a boy on line f	sa or 5h	unless the box on line 4 is	s checked):	
	If you want copies of tax inform		tten cor			going . ▶ □
	Note. Appointees will no longer			elated materials with the r	notices.	
t	If you do not want any copies of	notices or communications ser	nt to you	r appointee, check this b	ox	. ▶ □
6	Retention/revocation of tax infauthorizations for the same tax in to revoke a prior tax information and check this box	matters you listed on line 3 abo	ve unle	ss you checked the box of	n line 4. If you do not	t want
	To revoke this tax information at	thorization, see the instruction	s on pag	ge 4.		
7	Signature of taxpayer(s). If a ta corporate officer, partner, guard that I have the authority to execu	ian, executor, receiver, adminis	trator, tr	ustee, or party other than	the taxpayer, I certify	/
	► IF NOT SIGNED AND DATED	, THIS TAX INFORMATION A	UTHOR	IZATION WILL BE RETU	RNED.	
	► DO NOT SIGN THIS FORM II	TIT IS BLANK OR INCOMPLE	TE.			
	Signature	Date	S	ignature		Date
	Print Name	Title (if applicable)	_ P	rint Name	Title (if app	olicable)
			Г		DIN number for electronic	signatura
	PiN nu	mber for electronic signature	L		PIN number for electronic s	orgriacure

Cat. No. 11596P

Department of the Treasury Internal Revenue Service

Tax Information Authorization

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	OMB No. 1545-1165
	For IRS Use Only
Receiv	ved by:
Name	
Teleph	none
Functi	on
Date	

1 Taxpayer information. Taxpaye	er(s) must sign and date this for	m on line 7.		
Taxpayer name(s) and address (type or print) Taxpayer identification number		er		
		Day	rtime telephone number	Plan number (if applicable)
2 Appointee. If you wish to name	more than one appointee, attac	ch a list to th	is form.	14.57
Name and address	, , , , , , , , , , , , , , , , , , , ,	CAENO	***************************************	
		PTIN		
		Telephone	No.	
		I ax Ivo.		
3 Tax matters. The appointee is a tax matters listed on this line. Do	authorized to inspect and/or rec	eive confide	ntial tax information in	elephone No.
(a) Type of Tax	(b) Tax Form Number		(c) r(s) or Period(s)	(d) Specific Tax Matters (see instr.)
(Income, Employment, Excise, etc.) or Civil Penalty	(1040, 941, 720, etc.)		nstructions for line 3)	opeome rax matters (see mstr.)
4 Specific use not recorded on use not recorded on CAF, check	Centralized Authorization Files this box. See the instructions	e (CAF). If the on page 4. If	ne tax information au you check this box, s	thorization is for a specific skip lines 5 and 6 ▶
5 Disclosure of tax information (a If you want copies of tax information (basis, check this box Note. Appointees will no longer b If you do not want any copies of	mation, notices, and other write	tten commu	nications sent to the	e appointee on an ongoing ► ☐ notices.
6 Retention/revocation of tax in authorizations for the same tax to revoke a prior tax information and check this box	matters you listed on line 3 abon authorization, you must attaction.	ove unless you	ou checked the box of any authorizations you	on line 4. If you do not want
7 Signature of taxpayer(s). If a ta corporate officer, partner, guard that I have the authority to execu	lian, executor, receiver, adminis	trator, truste	e, or party other than	the taxpayer, I certify
► IF NOT SIGNED AND DATED	D, THIS TAX INFORMATION A	UTHORIZAT	TION WILL BE RETU	RNED.
► DO NOT SIGN THIS FORM I	F IT IS BLANK OR INCOMPLE	TE.		
Signature	Date	Signatu	ıre	Date
Print Name	Title (if applicable)	Print N	ame	Title (if applicable)
	nahar far alastronia -!			PIN number for electronic signature
L L L P!N nu	umber for electronic signature			First number for electronic signature

Department of the Treasury Internal Revenue Service

Tax Information Authorization

▶ Do not sign this form unless all applicable lines have been completed.▶ Do not use this form to request a copy or transcript of your tax return. Instead, use Form 4506 or Form 4506-T.

OMB No. 1545-1165 For IRS Use Only Name Telephone__

1 Taxpayer information. Taxpay	er(s) must sign and date this form	m on line	7.		
Taxpayer name(s) and address (type or print)			Taxpayer identification numb	er	
			Daytime telephone number	Plan number (if appli	cable)
			Daytime telephone number	Train namber (ii appir	ouoici
2 Appointee. If you wish to nam	e more than one appointee, attac	ch a list t	o this form.		
Name and address					
		PHIN			
		Telepl	none No.		
		raxiv	O		
			if new: Address Te		
3 Tax matters. The appointee is tax matters listed on this line. I	Do not use Form 8821 to request	copies o	of tax returns.		
(a) Type of Tax	(b) Tax Form Number		(c) Year(s) or Period(s)	(d) Specific Tax Matters	(see instr.)
(Income, Employment, Excise, etc.)	(1040, 941, 720, etc.)	(see	the instructions for line 3)	opecine rax matters	(500 111511.)
or Civil Penalty	(10.00,000,000,000,000,000,000,000,000,00		,		
		-			
		1			
4 Specific use not recorded or	n Centralized Authorization File	e (CAF).	If the tax information au	thorization is for a s	
use not recorded on CAF, che	ck this box. See the instructions of	on page	4. If you check this box, s	skip lines 5 and 6	▶ ⊔
5 Disclosure of tax information					
alf you want copies of tax info	rmation, notices, and other writ	tten con	nmunications sent to the	appointee on an or	ngoing
basis, check this box					▶ ⊔
	r receive forms, publications and				▶ □
b If you do not want any copies	of notices or communications ser	ni to you	r appointee, check this b	UX	
6 Retention/revocation of tax i	nformation authorizations. This	s tay info	ermation authorization aut	tomatically revokes a	ll prior
authorizations for the same tax	matters you listed on line 3 about	ve unles	s you checked the box o	n line 4. If you do no	t want
to revoke a prior tax information	on authorization, you must attac	ch a cop	y of any authorizations ye	ou want to remain in	effect
and check this box					▶ ⊔
To revoke this tax information	authorization, see the instructions	s on pag	le 4.		
7 Signature of taxpayer(s). If a	tax matter applies to a joint return dian, executor, receiver, adminis	n, either	husband or wife must signston or party other than	gn. It signed by a the taypayer. I certif	iv
that I have the authority to exe	cute this form with respect to the	tax mat	ters/periods on line 3 abo	ove.	y
,					
▶ IF NOT SIGNED AND DATE	D, THIS TAX INFORMATION A	UTHOR	ZATION WILL BE RETU	RNED.	
► DO NOT SIGN THIS FORM	IF IT IS BLANK OR INCOMPLE	TE.			
	1				
Circott	Date		gnature	VII.	Date
Signature	Date	31	gnatare		240
Print Name	Title (if applicable)	Pı	rint Name	Title (if ap	plicable)
. Cite Harris	the physical			, , ,	•
PIN	number for electronic signature			PIN number for electronic	signature
For Privacy Act and Paperwork Reduc	tion Act Notice, see page 4		Cat, No. 11596P	Form 8821	(Rev. 10-2011)

Department of the Treasury Internal Revenue Service

Tax Information Authorization

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	OMB No. 1545-1165
	For IRS Use Only
Rece	ived by:
Nam	е
Telep	phone
Func	tion
Date	

1 Taxpayer information. Taxpa	yer(s) must sign and date this fo	rm on line	e 7.	
Taxpayer name(s) and address (type or print)			Taxpayer identification number	er
			Daytime telephone number	Plan number (if applicable)
2 Appointee If you wish to nam	e more than one appointee, atta	ich a list t	o this form.	
Name and address	Appointee. If you wish to name more than one appointee, attach a list to this form. CAF No.			
		PHN		
		Telepi	hone No.	
		Fax N	O.	
				elephone No.
3 Tax matters. The appointee is tax matters listed on this line. I	Do not use Form 8821 to reques	ceive con	of tax returns.	
(a) Type of Tax	(b)		(c)	(d)
(Income, Employment, Excise, etc.) or Civil Penalty	Tax Form Number (1040, 941, 720, etc.)	(see	Year(s) or Period(s) the instructions for line 3)	Specific Tax Matters (see instr.)
4 Specific use not recorded or use not recorded on CAF, cher	n Centralized Authorization Fick this box. See the instructions	ie (CAF). on page	If the tax information aud 4. If you check this box, s	thorization is for a specific skip lines 5 and 6 ▶ □
5 Disclosure of tax information	(you must check a box on line	5a or 5b	unless the box on line 4 is	checked):
a If you want copies of tax info basis, check this box		itten con	nmunications sent to the	appointee on an ongoing ▶ □
b If you do not want any copies				
authorizations for the same tax to revoke a prior tax informati and check this box	nformation authorizations. The matters you listed on line 3 about authorization, you must attanted to the control of the contr	ove unles ch a cop	ss you checked the box o y of any authorizations yo 	n line 4. If you do not want
7 Signature of taxpayer(s). If a corporate officer, partner, guar that I have the authority to exe	tax matter applies to a joint returdian, executor, receiver, adminicute this form with respect to the	strator, tr	ustee, or party other than	the taxpayer, I certify
► IF NOT SIGNED AND DATE	ED, THIS TAX INFORMATION	AUTHOR	IZATION WILL BE RETU	RNED.
► DO NOT SIGN THIS FORM	IF IT IS BLANK OR INCOMPL	ETE.		
Signature	Date	Si	gnature	Date
Print Name	Title (if applicable)	Pr	rint Name	Title (if applicable)
PIN	number for electronic signature			PIN number for electronic signature
For Privacy Act and Paperwork Reduc	tion Act Notice, see page 4.		Cat. No. 11596P	Form 8821 (Rev. 10-2011)

(Rev. October 2011)

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F	or IRS Use Only
Receive	d by:
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Telepho	ne
Function	

 Taxpayer information. Taxpaye 	r(s) must sign and date this fo				
Taxpayer name(s) and address (type or print)		Taxpayer identification number			
		Doutimo tolor	phone number	Plan number (if	annlinable)
		Daytime telep	priorie riumbei	r lair ridiriber (ii	арріюавісу
2 Appointee. If you wish to name	more than one appointee, atta	ach a list to this form.			
Name and address		CAENIO			
		PTIN			
		Telephone No.			
		Fax No.			
		Check if new: Ad	dress 🗌 T	elephone No.	Fax No.
3 Tax matters. The appointee is a tax matters listed on this line. Do	uthorized to inspect and/or re not use Form 8821 to reques	ceive confidential tax at copies of tax return	cinformation in ins.	n any office of the	e IRS for the
(a)	(b)	(c)		(d	•
Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty	Tax Form Number (1040, 941, 720, etc.)	Year(s) or P (see the instruction	, ,	Specific Tax Ma	ters (see instr.)
		(0.5)		Ab a disable sin for	ifi-
4 Specific use not recorded on use not recorded on CAF, check	this box. See the instructions	on page 4. If you ch	eck this box,	skip lines 5 and 6	a specific
5 Disclosure of tax information (vou must shook a boy on line	Fo or Fb uplace the l	box on line 4 is	s chacked).	
a If you want copies of tax inform basis, check this box	mation, notices, and other wi	ritten communication	ns sent to the	appointee on a	
Note. Appointees will no longer	receive forms, publications an	d other related mate	riais with the h	ov	. .
b If you do not want any copies of	notices or communications st	ent to your appointed	e, check this b		
6 Retention/revocation of tax infauthorizations for the same tax r to revoke a prior tax information and check this box	matters you listed on line 3 ab	ove unless you chec	ked the box of	on line 4. If you do	not want
To revoke this tax information au	thorization, see the instruction	ns on page 4.			
7 Signature of taxpayer(s). If a taccorporate officer, partner, guardithat I have the authority to execu	ian, executor, receiver, admini	strator, trustee, or pa	arty other thar	i the taxpayer, I c	ertify
► IF NOT SIGNED AND DATED	, THIS TAX INFORMATION	AUTHORIZATION W	ILL BE RETU	IRNED.	
► DO NOT SIGN THIS FORM IF	TIT IS BLANK OR INCOMPL	ETE.			
		-			
Signature	Date	Signature			Date
Print Name	Title (if applicable)	Print Name		Title	(if applicable)
				PIN number for electr	ronic signature
PIN nui	mber for electronic signature			THA HUMBER TOT EIECT	onic signature

(Rev. October 2011)

Department of the Treasury Internal Revenue Service

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Name
Telephone
Function
Date

OMB No. 1545-1165

internal nevertue Service			Date
1 Taxpayer information. Taxpay	er(s) must sign and date this form	m on line 7.	
Taxpayer name(s) and address (type or print)		Taxpayer identification num	ber
		Daytime telephone number	Plan number (if applicable)
2 Appointee. If you wish to name	more than one appointee, attac	ch a list to this form.	1
Name and address	11 /	CAF No	
Trains and address		PTIN	
		Telephone No.	
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O To see How The see states in		<u> </u>	elephone No. Fax No.
3 Tax matters. The appointee is a tax matters listed on this line. D			n any office of the IRS for the
			(4)
(a) Type of Tax	(b) Tax Form Number	(c) Year(s) or Period(s)	(d) Specific Tax Matters (see instr.)
(Income, Employment, Excise, etc.)	(1040, 941, 720, etc.)	(see the instructions for line 3)	opecine rax waiters (see instr.)
or Civil Penalty	(1040, 541, 720, 616.)	(See the manachons for the S)	
4 Specific use not recorded on	Centralized Authorization File	(CAF) If the tay information as	thorization is for a specific
		on page 4. If you check this box,	
, , , , , , , , , , , , , , , , , , , ,		paga yaa aa a aari,	
5 Disclosure of tax information	(vou must check a box on line 5	a or 5h unless the boy on line 4	s chackad):
	••		•
a If you want copies of tax infor	mation, notices, and other writ	ten communications sent to the	
basis, check this box			
		other related materials with the	
b If you do not want any copies of	f notices or communications ser	it to your appointee, check this b	ox
6 Retention/revocation of tax in			
authorizations for the same tax	matters you listed on line 3 abo	ve unless you checked the box	on line 4. If you do not want
	n authorization, you must attac	h a copy of any authorizations y	
and check this box			▶ ⊔
To revoke this tax information a	uthorization, see the instructions	s on page 4.	
7 Signature of taxpayer(s). If a ta	ax matter applies to a joint return	either husband or wife must si	an If signed by a
		trator, trustee, or party other than	
		tax matters/periods on line 3 ab	
, and the second	·	·	
► IE NOT SIGNED AND DATE	THIS TAY INFORMATION AL	JTHORIZATION WILL BE RETU	RNED
FIL NOT GIGNED AND DATE.	o, This Tax III offination A	STOMEATION WILL BE TIET	
► DO NOT SIGN THIS FORM I	E IT IS BLANK OF INCOMPLE	TE	
PDO NOT SIGN THIS FORIVIT	FIT IS BLANK ON INCOMPLE	I C.	
	1		
Cignotius	Data	Signature	Date
Signature	Date	Signature	Date
Drint Name	Title (if applicable)	Print Namo	Title (if applicable)
Print Name	Title (if applicable)	Print Name	Title (if applicable)
			DIN number for electronic signature
PIN nu	umber for electronic signature		PIN number for electronic signature

Department of the Treasury Internal Revenue Service

Tax Information Authorization

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	OMB No. 1545-1165
	For IRS Use Only
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1 Taxpayer Information. Taxpaye	er(s) must sign and date this form	m on line	7.		
expayer name(s) and address (type or print)			Taxpayer identification number		
			Daytime telephone number	Plan number (if applicable)	
2 Appointee. If you wish to name	more than one appointee, attac	ch a list to	this form.		
Name and address		CAF No	2		
		PTIN			
		Teleph	one No.		
		Fax No			
		Check	if new: Address 🔲 Te	elephone No. 🗌 Fax No	. 🗆
3 Tax matters. The appointee is a tax matters listed on this line. Do	uthorized to inspect and/or reconnot use Form 8821 to request	eive confi copies of	dential tax information ir f tax returns.	any office of the IRS for th	ne
(a) Type of Tax	(b)		(c)	(d)	
(Income, Employment, Excise, etc.) or Civil Penalty	Tax Form Number (1040, 941, 720, etc.)		Year(s) or Period(s) ne instructions for line 3)	Specific Tax Matters (see in:	str.)

4 Specific use not recorded on use not recorded on CAF, check					
5 Disclosure of tax information (you must check a box on line 5	a or 5b u	nless the box on line 4 is	checked):	
a If you want copies of tax inform basis, check this box					
Note. Appointees will no longer	receive forms, publications and	other rela	ated materials with the n	otices.	
b If you do not want any copies of	notices or communications sen	nt to your	appointee, check this bo	×	
6 Retention/revocation of tax inf authorizations for the same tax r to revoke a prior tax information and check this box	natters you listed on line 3 abor	ve unless	you checked the box or	line 4. If you do not want	
To revoke this tax information au	thorization, see the instructions	s on page	4.		
7 Signature of taxpayer(s). If a tax corporate officer, partner, guardithat I have the authority to execute	an, executor, receiver, administ	trator, trus	stee, or party other than	the taxpayer, I certify	
► IF NOT SIGNED AND DATED	, THIS TAX INFORMATION AL	JTHORIZ	ATION WILL BE RETUR	RNED.	
▶ DO NOT SIGN THIS FORM IF	IT IS BLANK OR INCOMPLET	TE.			
Signature	Date	Sigr	ature	Date	e
Print Name	Title (if applicable)	Prin	t Name	Title (if applicable)	
PIN nun	nber for electronic signature] F	PIN number for electronic signature	•

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	OMB No. 1545-1165
	For IRS Use Only
Receiv	red by:
Name	
Teleph	one
Function	on
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1 Taxpayer information. Taxpayer(s) must sign and date this formation and address (type or print)		Taxpayer identification number			
		Daytime telephone numb	per Plan number (if applicable)		
2 Appointee. If you wish to name n	nore than one appointee, atta	ch a list to this form.			
Name and address		CAENO			
		PTIN			
		Telephone No.			
		Ι αλ 140.			
The second secon		and	Telephone No. 🗌 Fax No. 🗌		
3 Tax matters. The appointee is au tax matters listed on this line. Do			tion in any office of the IRS for the		
(a) Type of Tax	(b)	(c)	(d)		
(Income, Employment, Excise, etc.) or Civil Penalty	Tax Form Number (1040, 941, 720, etc.)	Year(s) or Period(s) (see the instructions for line	Specific Tax Matters (see instr.)		
4 Specific use not recorded on C					
use not recorded on CAF, check t	his box. See the instructions	on page 4. If you check this b	oox, skip lines 5 and 6 ▶ □		
Disclosure of tax information (ye a If you want copies of tax inform basis, check this box Note. Appointees will no longer reb If you do not want any copies of respectively.	ation, notices, and other wri	tten communications sent to	the appointee on an ongoing		
6 Retention/revocation of tax info authorizations for the same tax m to revoke a prior tax information and check this box	atters you listed on line 3 abo	ove unless you checked the b	oox on line 4. If you do not want		
To revoke this tax information auti	norization, see the instruction	s on page 4.			
7 Signature of taxpayer(s). If a tax corporate officer, partner, guardia that I have the authority to execute	n, executor, receiver, adminis	trator, trustee, or party other	than the taxpayer, I certify		
► IF NOT SIGNED AND DATED,	THIS TAX INFORMATION A	UTHORIZATION WILL BE R	ETURNED.		
► DO NOT SIGN THIS FORM IF	T IS BLANK OR INCOMPLE	TE.			
Signature	Date	Signature	Date		
Print Name	Title (if applicable)	Print Name	Title (if applicable)		
PIN numb	er for electronic signature		PIN number for electronic signature		

(Rev. October 2011)

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	OMB No. 1545-1165
	For IRS Use Only
Receiv	ed by:
Name	
Teleph	one
Function	on
Date	

		er(s) must sign and date this forn	n on line	e 7.				
Taxpayer name(s) and address (type or print)			Taxpayer identification number					
				Daytime telephone number	Plan number (if applic	able)		
2 Appointe	e. If you wish to name	more than one appointee, attac	h a list t	to this form.				
Name and addi	ess		CAF	No.				
			PTIN					
			Telephone No.					
			Fax N	0.				
	0.50		Check if new: Address ☐ Telephone No. ☐ Fax No. ☐					
3 Tax matter	ers. The appointee is a sisted on this line. D	authorized to inspect and/or rece o not use Form 8821 to request	eive con copies o	ifidential tax information in of tax returns.	n any office of the IRS	for the		
(a) Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (b) Tax Form Number (1040, 941, 720, etc.)		Tax Form Number	(c) Year(s) or Period(s) (see the instructions for line 3)		(d) Specific Tax Matters (see instr.)			
use not re	corded on CAF, check	Centralized Authorization File this box. See the instructions o	n page	4. If you check this box, s	skip lines 5 and 6 .	ecific . ▶ □		
a If you wan basis, che Note. App	nt copies of tax informack this box	you must check a box on line 5a mation, notices, and other writt	en com other re	nmunications sent to the	appointee on an on on otices.	going . ▶ □		
6 Retention/revocation of tax information authorizations. This tax information authorization automatically revokes all prior authorizations for the same tax matters you listed on line 3 above unless you checked the box on line 4. If you do not want								
to revoke a prior tax information authorization, you must attach a copy of any authorizations you want to remain in effect and check this box								
To revoke this tax information authorization, see the instructions on page 4.								
7 Signature of taxpayer(s). If a tax matter applies to a joint return, either husband or wife must sign. If signed by a corporate officer, partner, guardian, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute this form with respect to the tax matters/periods on line 3 above.								
► IF NOT	SIGNED AND DATED), THIS TAX INFORMATION AU	THORE	ZATION WILL BE RETUI	RNED.			
► DO NO	SIGN THIS FORM II	TIT IS BLANK OR INCOMPLET	E.					
						1		
Signature		Date	Sig	gnature		Date		
Print Name		Title (if applicable)	Pri	nt Name	Title (if appli	cable)		
	PIN nui	mber for electronic signature			PIN number for electronic sign	gnature		